



PTO/SB/21 (07-09)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

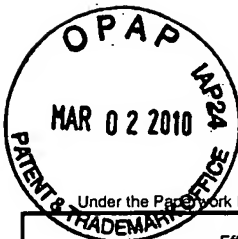
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/743,315-Conf. #5572
	Filing Date	December 23, 2003
	First Named Inventor	John Pretlove et al.
	Art Unit	2609
	Examiner Name	P. Saunders
Total Number of Pages in This Submission	Attorney Docket Number	43315-201410

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	VENABLE LLP		
Signature			
Printed name	Eric J. Franklin		
Date	March 2, 2010	Reg. No.	37,134



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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/743,315-Conf. #5572
		Filing Date	December 23, 2003
		First Named Inventor	John Pretlove
		Examiner Name	P. Saunders
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2609	
TOTAL AMOUNT OF PAYMENT	(\$)	.00	
	Attorney Docket No.	43315-201410	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

_____ - or HP = _____ x _____ = _____ **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ - or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ / 50 = _____ (round up to a whole number) x _____ = _____		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY		Registration No. 37,134	Telephone (202) 344-4936
Signature		(Attorney/Agent)	
Name (Print/Type)	Eric J. Franklin	Date	March 2, 2010



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Pretlove et al.

Art Unit: 2609

Application No: 10/743,315

Examiner: P. Saunders

Confirmation No: 5572

Filed: December 23, 2003

Atty. Docket No: 43315-201410

For: AN AUGMENTED REALITY SYSTEM
AND METHOD

Customer No:

26694

PATENT TRADEMARK OFFICE

CLAIM FOR PRIORITY AND SUBMISSION OF DOCUMENTS

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

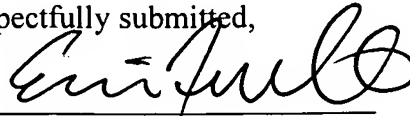
Applicants hereby claim priority under 35 U.S.C. 119 based on the following prior foreign application filed in the following foreign country on the date indicated:

<u>Country</u>	<u>Application No.</u>	<u>Date</u>
Sweden	0203908-9	December 30, 2002

In support of this claim, a certified copy of the said original foreign application is filed herewith.

Dated: March 2, 2010

Respectfully submitted,

By 

Eric J. Franklin

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